Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name
Office of Councilmember Paul Peralta
San Jose City Clerk

Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patsy Diga

Area Code/Phone Number
408-235-4929

2. Function or Event Information

Does the agency have a ticket policy?

Yes □  No □  

Event Description: Bawracuda v. Reign  

Date(s) 02/20/20

Ticket(s)/Pass(es) provided by agency?

Yes □  No □  

Was ticket distribution made at the behest of agency official?

Yes □  No □  

3. Recipients

* Use Section A to identify the agency's department or unit.  
* Use Section B to identify an individual.  
* Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:  
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □  Other □  Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Advocates of Silicon Valley</td>
<td>24</td>
<td>Recognition</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee  
Paul Peralta

Print Name  
Councilmember

Title  
3/4/20  
(month/day/year)

Comment:  

FPPC Form 802 (2/2016)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name: Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable): District 3
Designated Agency Contact (Name, Title): Patricia Ceja
Area Code/Phone Number: 408-535-1929
E-mail: patricia.ceja.sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☐
Event Description: Disney on Ice
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐

3. Recipients

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJ Five Fighters (include address and description)</td>
<td>20</td>
<td>Recognition</td>
</tr>
<tr>
<td>Barr Foundation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: ___________________________
Print Name: Paul Peralta
Title: Councilmember
Date: 3/4/20
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions A Public Document

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patria Ceja

Area Code/Phone Number E-mail
408-535-1429 patria.ceja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

Face Value of Each Ticket/Pass $143

Event Description: NOT SO SILENT NIGHT

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

Date(s) 12/07/19

Was ticket distribution made at the behest of agency official?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If yes: Name of Source

If no: Name of Official

3. Recipients

* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role Other Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roosevelt Community (include address and description)</td>
<td>23</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Perez
Councilmember

Print Name
Title

Comment:

[Signature]

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name: Office of Councilmember Paul Perez - District 3

Designated Agency Contact (Name, Title):
Patricia Caja

Area Code/Phone Number: 408-535-4429
E-mail: Patricia.Caja@sanjose.ca.gov

Event Description: Disney on Ice

Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]

Was ticket distribution made at the behest of agency official? Yes [ ] No [ ]

Function or Event Information

Does the agency have a ticket policy? Yes [ ] No [ ]

Face Value of Each Ticket/Pass: $249.50

Date(s): 10/20/19

Name of Source: San Jose Arena Authority

Official’s Name (Last, First):

3. Recipients

* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chil Advocates of Silicon Valley</td>
<td>20</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Perez
Print Name: Councilmember
Title: 11/7/19

Comment: 

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name: Office of Councilmember Paul Peralta

Division, Department, or Region (if applicable): District 3

Designated Agency Contact (Name, Title): Patricia Ceja

Area Code/Phone Number: 408-535-4929

E-mail: patricia.ceja@sjsu.ca.gov

1. Agency Name

Date Stamp: 2019 NOV 7 PM 3:52

California Form 802

For Official Use Only

Amendment (Must Provide Explanation in Part 3): □

Date of Original Filing: (month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? □ Yes □ No

Face Value of Each Ticket/Pass $ 33

Event Description: Disney on Ice

Date(s) 10/27/19

Ticket(s)/Pass(es) provided by agency? □ Yes □ No

If no: Name of Source

If yes: Was ticket distribution made at the behest of agency official? □ Yes □ No

Official's Name (Last, First)

3. Recipients

- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
</table>
| If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description) | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Peralta
Print Name: Councilmember
Title: □
(month, day, year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
Office of Councilmember Paul Peralte
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Pamela Caju

Area Code/Phone Number  E-mail
408-535-4924  patricia.caju@sanjose.ca.gov

Date of Original Filing: __________/________/________

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ __________

Event Description: J Paulin Acorns
Date(s) 10/17/19

Ticket(s)/Pass(es) provided by agency? Yes □ No □

Was ticket distribution made at the behest of agency official? Yes □ No □

3. Recipients

A. Name of Agency, Department or Unit
   Number of Ticket(s)/Passes
   Describe the public purpose made pursuant to the agency's policy

B. Name of Individual
   Last, First
   Number of Ticket(s)/Passes
   Identify one of the following:
   Ceremonial Role □ Other □ Income □
   If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization
   (include address and description)
   Number of Ticket(s)/Passes
   Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee  Print Name  Title
Paul Peralte
Councilmember

Comment: ____________________________
1. **Agency Name**
   - Office of Councilmember Paul Perez
   - District 3

2. **Function or Event Information**
   - **Does the agency have a ticket policy?**
     - Yes [ ] No [x]
   - **Event Description:**
     - Showu v. Flames
   - **Face Value of Each Ticket/Pass $:**
     - $83 and $240
   - **Date(s):**
     - 10/13/19
   - **Ticket(s)/Pass(es) provided by agency?**
     - Yes [x] No [ ]
   - **Was ticket distribution made at the behest of agency official?**
     - Yes [x] No [ ]

3. **Recipients**
   - **A. Name of Agency, Department or Unit**
     - **Number of Ticket(s)/Passes**
     - **Describe the public purpose made pursuant to the agency’s policy**
   - **B. Name of Individual**
     - **Number of Ticket(s)/Passes**
     - **Identify one of the following:**
       - Ceremonial Role [ ] Other [ ]
       - Income [ ]
       - Ceremonial Role [ ] Other [ ]
       - Income [ ]
   - **C. Name of Outside Organization**
     - **Number of Ticket(s)/Passes**
     - **Describe the public purpose made pursuant to the agency’s policy**
     - Stickball Charity Tournament
     - 24
     - Recognition

4. **Verification**
   - **Signature of Agency Head or Designee:**
   - **Print Name:**
   - **Title:**
   - **(month, day, year):**
   - **Comment:**
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patricia Caja
Area Code/Phone Number
408-735-4929
E-mail
Patricia.Caja@sanjose.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ 75
Event Description: Inno Lucha Libre
Date(s) 10/12/19
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐

3. Recipients
A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
- Ceremonial Role ☐
- Other ☐
- Income ☐
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (include address and description)
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy
Madre a Madre 20 Recognizanc

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Perez
Print Name
Title
Councilmember
10/22/19 (month, day, year)

Comment: 

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Agency Name

Office of Councilmember Paul Peralta

### Division, Department, or Region (if applicable)

District 3

### Designated Agency Contact (Name, Title)

Patricia Cyna

### Area Code/Phone Number

503-535-4929

### E-mail

patricia.cyna@jocr.gov

### 1. Function or Event Information

- **Does the agency have a ticket policy?** Yes [ ] No [ ]
  - **Face Value of Each Ticket/Pass $** 180.50

- **Event Description:** Repe Aguilar
  - **Date(s):** 09/29/19
  - **Provided by agency?** Yes [ ] No [ ]
  - **Name of Source:** San Jose Arena Authority

- **Was ticket distribution made at the behest of agency official?** Yes [ ] No [ ]
  - **Official’s Name (Last, First):**

### 2. Recipients

- **A.** Name of Agency, Department or Unit
  - Number of Ticket(s)/Passes
  - Describe the public purpose made pursuant to the agency's policy

- **B.** Name of Individual (Last, First)
  - Number of Ticket(s)/Passes
  - Identify one of the following:
    - Ceremonial Role [ ] Other [ ] Income [ ]
    - If checking 'Ceremonial Role’ or 'Other' describe below:

- **C.** Name of Outside Organization (include address and description)
  - Number of Ticket(s)/Passes
  - Describe the public purpose made pursuant to the agency's policy

### 3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee:** Paul Peralta

**Print Name:**

**Title:**

**Date:** 10/9/19

### Comment:

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**

**Office of Councilmember Paul injustice**

**Division, Department, or Region (if applicable)**

**District 3**

**Designated Agency Contact (Name, Title)**

**Patricia Ceja**

**Area Code/Phone Number**

**408-35-4929**

**E-mail**

**patricia.ceja@sanjose.ca.gov**

2. **Function or Event Information**

- **Does the agency have a ticket policy?** Yes □ No □
- **Face Value of Each Ticket/Pass $**

$185.00

- **Event Description:** Maluma

- **Provide Title/Explanation**

- **Date(s)**

09/15/19

- **Ticket(s)/Pass(es) provided by agency?** Yes □ No □

- **If no: Name of Source**

San Jose Arena Authority

- **Was ticket distribution made at the behest of agency official?** Yes □ No □

3. **Recipients**

   - **Use Section A to identify the agency’s department or unit.**
   - **Use Section B to identify an individual.**
   - **Use Section C to identify an outside organization.**

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ceremonial Role □ Other □ Income □</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. **Verification**

*I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.*

**Signature of Agency Head or Designee**

Paul Pérez

**Print Name**

**Title**

Councillor

**Date**

10/14/19

**Comment:**

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja
Area Code/Phone Number E-mail
408-535-4929 patricia.ceja@sjcity.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? [ ] Yes [ ] No
Face Value of Each Ticket/Pass $175.00
Event Description: Backstreet Boys
Date(s) 08, 04, 19
Ticket(s)/Pass(es) provided by agency? [ ] Yes [ ] No
If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? [ ] Yes [ ] No
If yes: Patricia Ceja
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
- Ceremonial Role [ ] Other [ ] Income [ ]
  If checking "Ceremonial Role" or "Other" describe below:
  Ceremonial Role [ ] Other [ ] Income [ ]
  If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy
Goodbye Mastic 16 Recognition
Neighborhood Association

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Paul Peralta Print Name Councilmember Title (month, day, year)

Comment:
Agency Name:

Office of Councilmember Paul Paraica
Division, Department, or Region (if applicable)
District 5

Designated Agency Contact (Name, Title)
Patricia Cea

Area Code/Phone Number E-mail
Yes 75-8929 Patricia ces e sanjose ca ga

Date Stamp

....................
O

 Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: (month, day, year)

Function or Event Information

Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 

Event Description: WNE Date(s) 

Ticket(s)/Pass(es) provided by agency? Yes □ No □ Name of Source 

Was ticket distribution made at the behest of agency official? Yes □ No □ Official's Name (Last, First)

Recipient Information

A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:

Ceremonial Role □ Other □ Income □

If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role □ Other □ Income □

If checking "Ceremonial Role" or "Other" describe below:

Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

East Santa Clara 8 Recognition

Business Association

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Print Name Title

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Paul Peralez
   Division, Department, or Region (if applicable)
   District 3
   Designated Agency Contact (Name, Title)
   Patricia Ceja
   Area Code/Phone Number E-mail
   408-535-4921 patricia.ceja@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes No
   Event Description: Sharks vs. Avalanche
   Ticket(s)/Pass(es) provided by agency? Yes No
   Face Value of Each Ticket/Pass $200.00
   Date(s) 05/08/19
   If no: San Jose Arena Authority
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes No
   If yes: ____________________________
   Official’s Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency’s policy
   
   B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
   Ceremonial Role Other Income
   If checking “Ceremonial Role” or “Other” describe below:
   
   C. Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency’s policy
   San Jose Firefighters 8 Recognition
   Burn Foundation

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee    Print Name    Title
   Paul Peralez Councilmember
   5/31/19 (month, day, year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number E-mail
408-535-4929 patricia.ceja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐ Face Value of Each Ticket/Pass $15.00
Event Description: San Jose Sharks, Avalanche Date(s) ________________ ________________
Provide Title/Explanation Ceremonial Role
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐ If yes: ________________
Name of Source: San Jose Arena Authority
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐ If yes: ________________________
Official's Name (Last, First): ________________________

3. Recipients
* Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following: Ceremonial Role ☐ Other ☐ Income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silicon Valley Council of Nonprofits</td>
<td>8</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Perez
Print Name: Paul Perez
Title: Councilmember
Date: 3/19/19 (month, day, year)

Comment: ________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Raul Pevallez

Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patiroid Ccja

Area Code/Phone Number E-mail
408-555-4929 patricia.cejaj@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $225.00

Event Description: Sharks vs. Red Wings
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
Name of Source San Jose Arena Authority

Was ticket distribution made at the behest of agency official? Yes [ ] No [ ]

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
Ceremonial Role [ ] Other [ ] Income [ ]

If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (Include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency’s policy

SJFD Local 230and Volunteer Firefighters 24 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Title
Paul Pevallez 3/19/19

Comment: ____________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peavlez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Pamela Ceja

Area Code/Phone Number E-mail
909-535-4929 pceja@orangecounty.ca.gov

Date of Original Filing: (month, day, year)

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 115.00
Event Description: Sharks v. Canadiens
Date(s) 03/07/19
Ticket(s)/Pass(es) provided by agency? Yes □ No □ If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □
Official’s Name (Last, First)

3. Recipients

A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual
(Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization
(Include address and description)
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Print Name
Title 3/19/19

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Rivas
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Caja

Area Code/Phone Number E-mail
408-535-4629 patricia.aja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐

Face Value of Each Ticket/Pass $ $67 and $33

Event Description: Disneys on Ice
Provide Title/ Explanation
Date(s) 02.13.19

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐

If no:
Name of Source San Jose Arena Authority

Was ticket distribution made at the behest of agency official? Yes ☐ No ☐

If yes: ____________________________
Official's Name (Last, First)

3. Recipients
*A use Section A to identify the agency's department or unit. *Use Section B to identify an individual. *Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Rivas
Print Name Councilmember
Title

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
Division 5

Designated Agency Contact (Name, Title)
Patricia Caja

Area Code/Phone Number E-mail
408-535-4929 patricia.caja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ 164.50
Event Description: Pepe Aguilar
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Date(s) 11/28/18
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐

3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other”, describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other”, describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Casadaleupe Washington Neighborhood Association</td>
<td>10</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Print Name
Councilmember
Title

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Pérez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number
E-mail
408-535-9929
pcticeja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ __________

Event Description: Sharks vs. Islanders
Date(s) 10/20/18

Ticket(s)/Pass(es) provided by agency? Yes □ No □
Name of Source
San Jose Arena Authority

Was ticket distribution made at the behest of agency official? Yes □ No □
Name of Source

3. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
</tbody>
</table>
|                                     |                           | If checking "Ceremonial Role" or "Other" describe below:

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>People Assisting the Homeless</td>
<td>24</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency, Department or District
Paul Pérez
Print Name
Councilmember
Title
10/29/18
(month, day, year)

Comment: ___________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patticia Ceja
Area Code/Phone Number
E-mail
408-535-4926
patticia.ceja@sanjosecega.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 103.00
Event Description: Nitro Circus
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes □ No □ If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □ If yes: __________________________
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit

Number
of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First)

Number
of Ticket(s)/Passes
Identify one of the following:

Ceremonial Role □ Other □ Income □
If checking “Ceremonial Role” or “Other” describe below:

Ceremonial Role □ Other □ Income □
If checking “Ceremonial Role” or “Other” describe below:

B. Name of Individual (Last, First)

Name of Outside Organization (include address and description) Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

Downtown Streets 24 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Print Name
Councilmember Title
Date (month, day, year)

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name

Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Pamela Cena

Area Code/Phone Number: 190-555-4121
E-mail: patricia.cena@sanjose.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 70.50
Event Description: Fall Out Boy
Date(s) 09/30/18
Ticket(s)/Pass(es) provided by agency? Yes □ No □ If no: San Jose Arena Authority
Was ticket distribution made at the behest of agency official? Yes □ No □ If yes: Official's Name (Last, First)

3. Recipients

* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ceremonial Role □ Other □ Income □</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ceremonial Role □ Other □ Income □</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGBTQ Youth</td>
<td>10</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Perez
Print Name: Councilmember
Title: 10/4/18

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja
Area Code/Phone Number E-mail
408-535-4929 patricia.cej@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ 157.00
Event Description: Las Vegas del Norte
Provided Title/Explanation
Date(s) 09/21/18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>DS Constituents</td>
<td>8</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: __________________________
Print Name: Paul Perez
Title: Councilmember
Date: 10/4/18

Comment: __________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San José

Division, Department, or Region (if applicable)
Council District 2

Designated Agency Contact (Name, Title)
Kimberly Hernandez

Area Code/Phone Number E-mail
(408) 535-4902 District2@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No □

Event Description: Da-Bangg concert______________

Ticket(s)/Pass(es) provided by agency? Yes □ No ☑

Was ticket distribution made at the behest of agency official? Yes ☑ No □

Face Value of Each Ticket/Pass $ 170
Date(s) 6 / 30 / 18

3. Recipients
• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:

Ceremonial Role ☐ Other ☐ Income ☐

Ceremonial Role ☐ Other ☐ Income ☐

Income ☐

C. Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

Federation of Indo-Americans of Northern California 24 recognition - Indian Flag Raising partners

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Sergio Jimenez

Print Name
Councilmember

Title
6/6/18

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Pamela Cep

Area Code/Phone Number E-mail
408-554-6929 pamela.ce@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description: Stars on Ice
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
Face Value of Each Ticket/Pass $164.00
Date(s) 05/13/18
If no: San Jose Arena Authority
Name of Source
If yes: ________________________
Official’s Name (Last, First)

3. Recipients
• Use Section A to identify the agency’s department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit

Number
of Ticket(s) /
Passes
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First)

Number
of Ticket(s) /
Passes
Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (include address and description)

Number
of Ticket(s) /
Passes
Describe the public purpose made pursuant to the agency’s policy

Market Makan and 24 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Peralta
Print Name
Councillor
Title

Comment:
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions  

1. Agency Name  
Office of Councilmember Paul Pocan  
Division, Department, or Region (if applicable)  
District 3  

Designated Agency Contact (Name, Title)  
Patricia Ceja  
Area Code/Phone Number  
408-535-4921  
E-mail  
patricia.ceja@sanjose.ca.gov  

2. Function or Event Information  
Does the agency have a ticket policy? Yes No  
Face Value of Each Ticket/Pass $ 75.00  
Event Description: Cirque du Soleil Crystal  
Date(s) 04/01/18  
Ticket(s)/Pass(es) provided by agency? Yes No  
Was ticket distribution made at the behest of agency official? Yes No  
Name of Source  
San Jose Arena Authority  
Official's Name (Last, First)  

3. Recipients  
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.  

A. Name of Agency, Department or Unit  
Number of Ticket(s)/Passes  
Describe the public purpose made pursuant to the agency's policy  

B. Name of Individual  
(Last, First)  
Number of Ticket(s)/Passes  
Identify one of the following:  
Ceremonial Role  
Other  
Income  
If checking "Ceremonial Role" or "Other" describe below:  
Ceremonial Role  
Other  
Income  
If checking "Ceremonial Role" or "Other" describe below:  

C. Name of Outside Organization  
(include address and description)  
Number of Ticket(s)/Passes  
Describe the public purpose made pursuant to the agency's policy  

4. Verification  
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.  

Signature of Agency Head or Designee  
Paul Pocan  
Print Name  
Councillor  
Title  
4/16/18  
(month, day, year)  

Comment:  

FPPC Form 802 (2/2016)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Paul Peralta
   Division, Department, or Region (if applicable)
   District
   Designated Agency Contact (Name, Title)
   Patricia Cepa
   Area Code/Phone Number: 408-535-4929
   E-mail: patricia.cepajocan.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes □ No □
   Face Value of Each Ticket/Pass $163.50
   Event Description: Ricardo Arjona
   Date(s): 03/11/18
   Ticket(s)/Pass(es) provided by agency? Yes □ No □
   If no: San Jose Arena Authority
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes □ No □
   If yes: (Official’s Name (Last, First))

3. Recipients
   * Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Al' Amor Family Groups</td>
<td>24</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee: Paul Peralta
   Print Name: Councilmember
   Title: 3/7/18
   (month, day, year)
   Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Pesalce
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Caju

Area Code/Phone Number E-mail
408-35-4924 patricia.caju@sanjose/ca

Date Stamp
2018 MAR 7 PM 4:29

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ 50
Event Description: Barracuda vs. Monstars
Date(s) 03/10/15
Ticket(s)/Pass(es) provided by agency? Yes □ No □
If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest Yes □ of agency official?
No □ □
If yes:
Official's Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit Number of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/ Passes Identify one of the following:

Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description) Number of Ticket(s)/ Passes Describe the public purpose made pursuant to the agency's policy
Greater Opportunities For the Developmentally Disabled 24 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Print Name Title
Paul Pesalce

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name

Office of Councilmember Paul DeSaulnier

Division, Department, or Region (if applicable)

District 3

Designated Agency Contact (Name, Title)

Patricia Caja

Area Code/Phone Number E-mail

408-535-4924

Date Stamp

San Jose City Clerk

California Form 802

For Official Use Only

2. Function or Event Information

Does the agency have a ticket policy?

Yes ☑ No ☐

Face Value of Each Ticket/Pass $ 97

Event Description: Disney on Ice

Date(s) 02.24.18

Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐

If no: San Jose Arena Authority

Name of Source

Was ticket distribution made at the behest of agency official?

Yes ☑ No ☐

3. Recipients

* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit

Number of Ticket(s)/Passes

Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)

Number of Ticket(s)/Passes

Identify one of the following:

Ceremonial Role ☑ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role ☑ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Paul DeSaulnier

Print Name

Councilmember

Title

3/5/18

(month, day, year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patricia Ceja
Area Code/Phone Number
(408) 535-4929
E-mail
patricia_ceja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Event Description: Harlem Globetrotters
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
Face Value of Each Ticket/Pass $16.00
Date(s) 01/21/18
Name of Source: San Jose Arena Authority
Official's Name (Last, First)

3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Advocates of Silicon Valley</td>
<td>24</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Peralta
Print Name: Councilmember
Title: (month, day, year) 01/29/18
Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Paul Peralez
   Division, Department, or Region (if applicable)
   District 5

   Designated Agency Contact (Name, Title)
   Patricia Cej

   Area Code/Phone Number E-mail
   408-535-4920 Patricia.cej@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No □
   Face Value of Each Ticket/Pass $ 42.00
   Event Description: Disney on Ice
   Date(s) 10/29/17
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No □

3. Recipients
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Passes
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      (include address and description)
      Number of Ticket(s)/Passes
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Paul Peralez
   Councilmember
   Comment:

California Form 802
For Official Use Only
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Pamela Cera
Area Code/Phone Number E-mail
408-535-4929 pamela.cera@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $ 92.00
Event Description: Disney on Ice Date(s) 10-28-17
Ticket(s)/Pass(es) provided by agency? Yes □ No □ Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □ Official's Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:
Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy
Daisy Girl Scout Troop 29 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Peralta
Print Name
Councilmember
Title
Date of Original Filing: Oct 26, 2017

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Pérez
Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Caja

Area Code/Phone Number
(408) 535-4929
E-mail
patricia.aja@sanjose.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐ Face Value of Each Ticket/Pass $ 104.00
Event Description: Professional Bull Riders
date(s) 10/21/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐ If no: San Jose Arena Authority
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☐ If yes:
Official’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (include address and description)
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency’s policy

Roosevelt Park
16
 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Pérez
Print Name
Councilmember
Title
Date (month, day, year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
District 3

Designated Agency Contact (Name, Title)
Patiencia Ceja

Area Code/Phone Number E-mail
408-535-4929 patricia.ceja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Event Description: Marco Antonio Solis
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Was ticket distribution made at the behest of agency official?
Yes □ No □
Face Value of Each Ticket/Pass $ 189.50
Date(s) 09/16/17
Name of Source: San Jose Arena Authority

3. Recipients
A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description)
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency's policy

The Latina Coalition of Silicon Valley 10 Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Perez
Print Name: Councilmember
Title: (month, day, year)

Comment:
**Agency Report of:**

Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - Office of Councilmember Paul Peralta
   - Division, Department, or Region (if applicable)
   - District 3

   Designated Agency Contact (Name, Title)
   - Patricia Ceja

   Area Code/Phone Number E-mail
   - 408-535-4929
   - patricia.ceja@sanjoseca.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes □ No □
   - Event Description: Marco Antonio Solis
     - Provide Title/ Explanation
   - Ticket(s)/Pass(es) provided by agency? Yes □ No □
   - Was ticket distribution made at the behest of agency official? Yes □ No □
   - Face Value of Each Ticket/Pass $ \_148.00
     - Date(s) 09/10/17
     - Name of Source: San Jose Arena Authority
     - Official's Name (Last, First)

3. **Recipients**
   - Use Section A to identify the agency's department or unit.
   - Use Section B to identify an individual.
   - Use Section C to identify an outside organization.

   **A.** Name of Agency, Department or Unit
      - Number of Ticket(s)/Passes
      - Describe the public purpose made pursuant to the agency's policy

   **B.** Name of Individual (Last, First)
      - Number of Ticket(s)/Passes
      - Identify one of the following:
        - Ceremonial Role □ Other □ Income □
          - If checking “Ceremonial Role” or “Other” describe below:
        - Ceremonial Role □ Other □ Income □
          - If checking “Ceremonial Role” or “Other” describe below:

   **C.** Name of Outside Organization (Include address and description)
      - Number of Ticket(s)/Passes
      - Describe the public purpose made pursuant to the agency's policy

   Rising District 3 Leaders 8 Recognition

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee
   - Print Name
   - Councilmember
   - Title
   - 9/10/17 (month, day, year)

   Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patricia Caja
Area Code/Phone Number E-mail
408-535-4929 patricia.caja@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐ Face Value of Each Ticket/Pass $ 131.00
Event Description: Heart '80s Birthday Bash
Date(s) 08/24/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
If yes: ____________________________
Name of Source: ____________________________
Official's Name (Last, First)

3. Recipients

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catholic Charities (include address and description)</td>
<td>16</td>
<td>Recognition</td>
</tr>
<tr>
<td>Refugee Foster Parents</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Perez
Print Name
Councilmember
Title
Date (month, day, year) 8/30/17

Comment: ____________________________
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
Office of Councilmember Paul Peralta

Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number
408-535-4929

E-mail
patricia.ceja@sjoseca.gov

**2. Function or Event Information**

Does the agency have a ticket policy?  Yes ☐  No ☐

Event Description: Mardi Gras

Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☐

Face Value of Each Ticket/Pass $ 115.00

Date(s) 03/20/17

Was ticket distribution made at the behest of agency official?  Yes ☐  No ☐

Name of Source
San Jose Arena Authority

**3. Recipients**

- **A. Name of Agency, Department or Unit**
  - Number of Ticket(s)/Passes
  - Describe the public purpose made pursuant to the agency's policy

- **B. Name of Individual**
  - Number of Ticket(s)/Passes
  - Identify one of the following:
    - Ceremonial Role ☐  Other ☐  Income ☐

  If checking "Ceremonial Role" or "Other" describe below:

  Ceremonial Role ☐  Other ☐  Income ☐

If checking "Ceremonial Role" or "Other" describe below:

- **C. Name of Outside Organization**
  - Number of Ticket(s)/Passes
  - Describe the public purpose made pursuant to the agency's policy

Downtown Enrichment

24  Recognition

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Peralta

Print Name
Councilmember

Title
8/30/17

Comment:  

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
Office of Councilmember Paul Perez

**Division, Department, or Region (if applicable)**
District 3

**Designated Agency Contact (Name, Title)**
Patricia Ceja

**Area Code/Phone Number**
408-535-4929

**E-mail**
patricia.ceja@sanjose.gov

**Date Stamp**
July 24, 2017

**California Form**
802

**For Official Use Only**

**2. Function or Event Information**

- **Does the agency have a ticket policy?** Yes [ ] No [ ]
- **Event Description:** Freestyle Explosion
- **Face Value of Each Ticket/Pass:** $61.50
- **Date(s):** 07/15/17
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [ ]
- **Name of Source:** San Jose Arena Authority

**3. Recipients**

- **A. Name of Agency, Department or Unit**
- **Number of Ticket(s)/Passes**
- **Describe the public purpose made pursuant to the agency's policy**

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **B. Name of Individual**

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

- **C. Name of Outside Organization**

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>On Parc 22</td>
<td>24</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee**
Paul Perez

**Print Name**
Councilmember

**Title**
07/24/17 (month, day, year)

**Comment:**
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
Office of Councilmember Paul Purcel

Division, Department, or Region (if applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number E-mail
408-535-9929 patricia.ceja@sanjoseca.gov

**2. Function or Event Information**

Does the agency have a ticket policy? Yes ☑ No □

Face Value of Each Ticket/Pass $ 250

Event Description: Roga Waters

Provide Title/Explanation

Date(s) 06/07/17

Ticket(s)/Pass(es) provided by agency? Yes ☑ No □

If no: San Jose Arena Authority

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☑ No □

Official’s Name (Last, First)

**3. Recipients**

* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☑ Other ☑ Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☑ Other ☑ Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kathy Sutherland</td>
<td>2</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Print Name

Councilmember

Title

(month, day, year)

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Pamela Ceja
Area Code/Phone Number E-mail
408-535-4920 pamela.cej@sanjose.ca.gov

**2. Function or Event Information**
- Does the agency have a ticket policy? Yes [ ] No [ ]
- Face Value of Each Ticket/Pass $250
- Event Description: Roger Waters
- Date(s) 06/07/17
- Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
- If no: San Jose Arena Authority
- Was ticket distribution made at the behest of agency official? Yes [ ] No [ ]
- If yes: San Jose Arena Authority
- Official's Name (Last, First)

**3. Recipients**
- Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delmas Park, Neighborhood Association</td>
<td>16</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

**4. Verification**
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Perez
Print Name
Councilmember
Title
Date (month, day, year)
6/19/17

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Paul Peralta
   Division, Department, or Region (if applicable)
   District 3
   Designated Agency Contact (Name, Title)
   Patricia Ceja
   Area Code/Phone Number  E-mail
   408-535-4929  patricia.ceja@sanjoseca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 128 and $ 138
   Event Description: WWE Payback
   Date(s) 4/18/17 1/1
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   If no: San Jose Arena Authority
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
   If yes: Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit  Number of Ticket(s)/Passes
   Describe the public purpose made pursuant to the agency's policy
   
   B. Name of Individual (Last, First)  Number of Ticket(s)/Passes
   Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:
   C. Name of Outside Organization (include address and description)  Number of Ticket(s)/Passes
   Describe the public purpose made pursuant to the agency's policy
   P.L.A.Y.C.E  24 Recognition

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee  Print Name  Title
   Paul Peralta  Councilmember  5/8/17 (month, day, year)
   Comment: }

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Raul Peralez
   District 3

Divison, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)
Patricia Caja

Area Code/Phone Number  E-mail
408-354-4920  Patricia.caja@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☑  No ☐
   Event Description: Sharks v. Flames
   Ticket(s)/Pass(es) provided by agency?  Yes ☑  No ☐
   Face Value of Each Ticket/Pass $222 and $50
   Date(s) 4/18/17
   Was ticket distribution made at the behest of agency official?  Yes ☑  No ☐
   Name of Source: San Jose Arena Authority

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit  Number of Ticket(s)/Passes  Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual  Number of Ticket(s)/Passes  Identify one of the following:
   (Last, First)                          Income  ☐    Other  ☐  Ceremonial Role ☐

   C. Name of Outside Organization  Number of Ticket(s)/Passes  Describe the public purpose made pursuant to the agency's policy
   (Include address and description)

   San Jose Taiko  24  Recognition

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Councilmember  Signature of Agency Head or Designee  Print Name  Title  4/10/17

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
Office of Councilmember Paul
Divison, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patricia Cea
Area Code/Phone Number E-mail
408-535-4929 patricio.cea@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $199.95
Event Description: Ariana Grande
Date(s) 3/27/17
Ticket(s)/Pass(es) provided by agency? Yes □ No □
If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? Yes □ No □
If yes: ____________________________
Official’s Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
<th>Ceremonial Role □ Other □ Income □</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
<td></td>
</tr>
</tbody>
</table>

C. Name of Outside Organization (Include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency's policy

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Queenettype</td>
<td>100</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Pesalez
Print Name: Councilmember
Title: 4/4/17
(month, day, year)

Comment: ____________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
# Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

## A Public Document

### 1. Agency Name

**Office of Curriculm member Raul Peza**

Division, Department, or Region (if applicable)

**District 3**

Designated Agency Contact (Name, Title)

**Patricia Cya**

Area Code/Phone Number: **(408) 535-4129**

E-mail: **patricia.cya@sanjose.ca.gov**

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [ ] No [ ]
- **Face Value of Each Ticket/Pass:** $92 and $50
- **Event Description:** Disney on Ice
- **Date(s):** 2/25/17
- **Provide Title/ Explanation:**

<table>
<thead>
<tr>
<th>Name of Source</th>
<th>Official's Name (Last, First)</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Jose Arena Authority</td>
<td>Patricia Cya</td>
</tr>
</tbody>
</table>

- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [ ]
- **Was ticket distribution made at the behest of agency official?** Yes [ ] No [ ]

### 3. Recipients

* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td>Hablemos, Gardner</td>
<td>24</td>
<td>Recognition</td>
</tr>
<tr>
<td>Academy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee:**

**Raul Peza**

**Print Name:**

**Councilmember**

**Title:**

**3/2/17**

**Comment:**

---

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

**1. Agency Name**
Office of Councilmember Paul Devore
Division, Department, or Region (If Applicable)
District 3

**Designated Agency Contact (Name, Title)**
Patricia Ceja

**Area Code/Phone Number**
408-435-4929

**E-mail**
patricia.ceja@sanjoseca.gov

**Date Stamp**
2017 JAN 18 PM 4:00 SSM OTC

**2. Function or Event Information**

- **Does the agency have a ticket policy?** Yes □ No □
- **Event Description** Harlan Globetrotters
- **Face Value of Each Ticket/Pass** $165.50
- **Date(s)** 1/22/17
- **Ticket(s)/Pass(es) provided by agency?** Yes □ No □
- **If yes:**
  - **Name of Source** San Jose Arena Authority
  - **Name of Source** Official’s Name (Last, First)

**3. Recipients**

- **A. Name of Agency, Department or Unit**
  - **Number of Ticket(s)/Pass(es)**
  - **Describe the public purpose made pursuant to the agency’s policy**

- **B. Name of Individual (Last, First)**
  - **Number of Ticket(s)/Pass(es)**
  - **Identify one of the following:**
    - Ceremonial Role □ Other □ Income □
    - Ceremonial Role □ Other □ Income □

- **C. Name of Outside Organization (include address and description)**
  - **Number of Ticket(s)/Pass(es)**
  - **Describe the public purpose made pursuant to the agency’s policy**

- **Child Advocates of Silicon Valley**
  - **Number of Ticket(s)/Pass(es)**

**4. Verification**
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee**
Paul Devore

**Print Name**
Councilmember

**Title**

**Date**
1/17/17

**FPPC Form 802 (4/12)**

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (if applicable)
District 3
Designated Agency Contact (Name, Title)
Patricia Ceja

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Event Description: Jingle Ball
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Was ticket distribution made at the behest of agency official? No □ Yes □
Face Value of Each Ticket/Pass: $114.00
Date(s): 12/1/16
Name of Source: San Jose Arena Authority
Official's Name (Last, First)

3. Recipients
- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roosevelt Youth Center</td>
<td>16</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understood FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee:
Print Name: Paul Peralta
Title: Councilmember
Date (Month, Day, Year):

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Perez
Division, Department, or Region (if applicable)
District 3
Described Agency Contact (Name, Title)
Patricia Cya
Area Code/Phone Number 408-535-4424
E-mail: patricia.cya@sanjose.ca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [X] No [ ]
Face Value of Each Ticket/Pass $ 40.00
Event Description: Barracuda v. Condors
Provide Title/Explaination
Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
If no: San Jose Arena Authority
Name of Source
Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
If yes: ________________________________________________________________________
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
Ceremonial Role [ ] Other [ ] Income [ ]
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (Include address and description)
Number of Ticket(s)/Passes
Describe the public purpose made pursuant to the agency's policy

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Perez
Councilmember
Title
Print Name

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Peralez
   Division, Department, or Region (If Applicable)
   District 3

   Designated Agency Contact (Name, Title)
   Patricia Caja

   Area Code/Phone Number
   408-296-4924
   E-mail
   patricia.ca@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [ ] No [X]
   Event Description
   "Disney on Ice"
   Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $ 87.00
   Date(s)
   10/22/16
   Name of Source
   San Jose Arena Authority
   Official's Name (Last, First)

3. Recipients
   - Use Section A to identify the agency's department or unit.
   - Use Section B to identify an individual.
   - Use Section C to identify an outside organization.
   
   **A.**
   Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

   **B.**
   Name of Individual
   Last, First
   Number of Ticket(s)/Pass(es)
   Identify one of the following:
   Ceremonial Role [X] Other [ ] Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:
   Ceremonial Role [X] Other [ ] Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:

   **C.**
   Name of Outside Organization
   (Include address and description)
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   Queen Mary
   24
   Recognition

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Paul Peralez
   Councilmember
   (Month, Day, Year)
   Print Name
   Title

Comment: ____________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
**Agency Report of:**

**Ceremonial Role Events and Ticket/Pass Distributions**

1. **Agency Name**
   - Office of Councilmember Peralez
   - District 3
   - Designated Agency Contact: Gabriela Soto-Galvan, Assistant

2. **Function or Event Information**
   - Event Description: D3 Yes!
   - Ticket(s)/Pass(es) provided by agency: Yes
   - Face Value of Each Ticket/Pass $24.00

3. **Recipients**
   - **A. Name of Agency, Department or Unit**
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

   - **B. Name of Individual**
     -Number of Ticket(s)/Pass(es)
     - Identify one of the following:
       - Ceremonial Role
       - Other

   - **C. Name of Outside Organization**
     - (include address and description)
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

4. **Verification**
   - I have read and understand FPPC Regulations 1994, 1 and 1994-2. I have verified that the distribution(s) is (are) in accordance with the requirements.
   - Comment

---

**Signature:** Ram Peralez, Councilmember

**Date:** 10/26/16

**FPPC Form 862 (4/12)**

**FPPC Toll-Free Helpline:** 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Division, Department, or Region (if Applicable)
   Office of Councilmember Peralez
   District 3

   Designated Agency Contact (Name, Title)
   Gabriela Soto-Galvan

   Area Code/Phone Number
   408-525-4430

   E-mail
   Gabriela.Soto@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No □
   Event Description
   San Jose Department on Association
   Date(s)
   10.07.2016
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
   Was ticket distribution made at the behest of agency official? Yes ☑ No □
   Face Value of Each Ticket/Pass $17.00

3. Recipients
   * Use Section A to Identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A.</th>
<th>Name of Agency, Department or Unit</th>
<th>Number of Tickets/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B.</th>
<th>Name of Individual (Last, First)</th>
<th>Number of Tickets/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C.</th>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Tickets/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>D3 Youth Expo for Sustainability</td>
<td>30</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
   I have reviewed and understand FPPC Regulations 19441 and 19442. I have verified that the distribution said forth above is in accordance with the requirements.

   Signature of Agency Head or Designee: Paul Peralez, Councilmember
   Date: 10/26/2016

   Comment: ________________________

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Ramos

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Event Description [ ]
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
Was ticket distribution made at the behest of agency official? Yes [ ] No [ ]

3. Recipients
A. Name of Agency, Department or Unit
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency's policy

B. Name of Individual
Number of Ticket(s)/Pass(es)
Identify one of the following:
- Ceremonial Role
- Official
- Income

C. Name of Outside Organization
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency's policy

4. Verification
I have read and understand PPC Form 802 (April 1, 2016). I have verified that the distribution of tickets/passes is in accordance with the requirements.

Signature: [Signature]
Date: 10/25/16

Comment: [Comment]
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (If Applicable)
Dist 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number E-mail
408-535-4929 patricia_ceja@sanjose.ca.gov

Date Stamp
2016 SEP 20 PM 2:06

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Event Description: Drake
Face Value of Each Ticket/Pass $ 179.50
Date(s) 9/24/16
Ticket(s)/Pass(es) provided by agency? Yes □ No □
If no: San José Arena Authority
Name of Source
If yes: Official's Name (Last, First)

3. Recipients
• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SJ Digital Arts Program</td>
<td>10</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Print Name
Title
Date (Month, Day, Year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Office of Councilmember Paul Peralta
Division, Department, or Region (If Applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number E-mail
408-535-4929 patricia.ceja@sanjose.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐

Event Description Julian Alvarez
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐

Was ticket distribution made at the behest of agency official? No ☐ Yes ☐

Face Value of Each Ticket/Pass $ 168.00
Date(s) 07/15/16

If no: ____________________
If yes: ____________________

Name of Source
San Jose Arena Authority
Official’s Name (Last, First)

3. Recipients

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ceremonial Role ☐</td>
<td>Other ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td>Ceremonial Role ☐</td>
<td>Other ☐</td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mamas Unidas</td>
<td>16</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Paul Peralta
Counclumember
Title 7/15/16

Comment: ____________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 886/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - Office of Councilmember Paul Peralta
   - District 3

   **Designated Agency Contact**
   - Patricia Ceja
   - Area Code/Phone Number: 408-535-9926
   - E-mail: patricia.ceja@sanjoseca.gov

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes ☑ No ☐
   - **Event Description:** Disneyland
   - **Face Value of Each Ticket/Pass:** $102.00
   - **Date(s) provided:** 02/20/16
   - **Ticket(s)/Pass(es) provided by agency?** Yes ☑ No ☐
   - **Name of Source:** San Jose Arena Authority

3. **Recipients**
   - **A. Name of Agency, Department or Unit**
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency’s policy
   - **B. Name of Individual**
     - Name (Last, First)
     - Number of Ticket(s)/Pass(es)
     - Identify one of the following:
       - Ceremonial Role ☐ Other ☐ Income ☐
         - If checking “Ceremonial Role” or “Other” describe below:
   - **C. Name of Outside Organization**
     - (Include address and description)
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency’s policy

4. **Verification**
   - **Signature of Agency Head or Designee:** Paul Peralta
   - **Print Name:** Councilmember
   - **Title:**
   - **Date:** 2/12/16
   - **Comment:**

California Form 802
For Official Use Only

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
1. **Agency Name**
   - Office of Councilmember Paul Pealez
   - District 3

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes □ No □
   - Event Description: Disneyland
   - Face Value of Each Ticket/Pass: $102-00
   - Date(s): 02/19/16
   - Ticket(s)/Pass(es) provided by agency? Yes □ No □
   - Was ticket distribution made at the behest of agency official? Yes □ No □

3. **Recipients**
   - **A. Name of Agency, Department or Unit**
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

   - **B. Name of Individual**
     - Number of Ticket(s)/Pass(es)
     - Identify one of the following:
       - Ceremonial Role □ Other □ Income □
       - Ceremonial Role □ Other □ Income □

   - **C. Name of Outside Organization**
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: Paul Pealez
   - Print Name: Councilmember
   - Title: (Month, Day, Year)

Comment: ____________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
1. **Agency Name**
   - Office of Councilmember Paul Perez
   - Division, Department, or Region (If Applicable): District 3

2. **Designated Agency Contact**
   - Name: Patricia Cia
   - Title: E-mail: patricia.cia@sanjoseca.gov
   - Area Code/Phone Number: 408-735-4929

3. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes [ ] No [ ]
   - **Event Description**: Shavics vs. Maple Leafs
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [ ]
   - **Face Value of Each Ticket/Pass**: $222.00
   - **Date(s)**: 1, 6, 16
   - **Name of Source**: San Jose Arena Authority
     - **Name of Source**: Name of Source

4. **Recipients**
   - **A. Name of Agency, Department or Unit**
     - **Number of Ticket(s)/Pass(es)**
     - **Describe the public purpose made pursuant to the agency's policy**
   - **B. Name of Individual**
     - **Last, First**
     - **Number of Ticket(s)/Pass(es)**
     - **Identify one of the following:**
       - Ceremonial Role [ ] Other [ ] Income [ ]
       - Ceremonial Role [ ] Other [ ] Income [ ]
   - **C. Name of Outside Organization**
     - **Include address and description**
     - **Number of Ticket(s)/Pass(es)**
     - **Describe the public purpose made pursuant to the agency's policy**

5. **Verification**
   - **Signature of Agency Head or Designee**: Paul Perez
   - **Print Name**: Councilmember
   - **Title**:
   - **Date**: 1/8/10

Comment: ____________________________
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - Office of Councilmember Raul Price
   - District 3

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes □ No □
   - Event Description: Paramour in Texas Stars
   - Ticket(s)/Pass(es) provided by agency? Yes □ No □
   - Was ticket distribution made at the behest of agency official? No □ Yes □
   - Face Value of Each Ticket/Pass $50.00
   - Date(s): 11/20/15
   - Name of Source: San Jose Arena Authority

3. **Recipients**
   - Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.
   - **A. Name of Agency, Department or Unit**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency's policy**
   - **B. Name of Individual (Last, First)**
   - **Number of Ticket(s)/Pass(es)**
   - **Identify one of the following:**
     - Ceremonial Role □ Other □ Income □
     - Ceremonial Role □ Other □ Income □
   - **C. Name of Outside Organization (Include address and description)**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency's policy**
     - Plaza Arrago Neighborhood Association 24: Recognition

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942.1. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: Raul Prieto
   - Print Name: Councilmember
   - Title: 11/19/15

**Comment:**
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name

Office of Councilmember Paul Perez
Division, Department, or Region (If Applicable)
District 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number 408-535-4924
E-mail patricia.ceja@sanjose.ca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes □ No □

Event Description Juan Gabriel

Face Value of Each Ticket/Pass: $208.00

Ticket(s)/Pass(es) provided by agency? Yes □ No □

Was ticket distribution made at the behest of agency official? No □ Yes □

Date(s): 11/27/15

Name of Source San Jose Arena Authority

3. Recipients

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Identify one of the following:

Ceremonial Role □ Other □ Income □

If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role □ Other □ Income □

If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (Include address and description) Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency’s policy

McKinley Banita 24 Recognition

Neighborhood Association

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942.1. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Paul Perez Councilmember 11-20-15

Print Name Title

Comment:
### Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

#### 1. Agency Name
Office of Councilmember Paul Peralta

Division, Department, or Region (If Applicable)

district 3

Designated Agency Contact (Name, Title)
Patricia Ceja

Area Code/Phone Number 408-535-4929
E-mail Patricia.Ceja@sanjose.ca.gov

#### 2. Function or Event Information

Does the agency have a ticket policy? **Yes**

Event Description *Nitro Circus Live*

Ticket(s)/Pass(es) provided by agency? **Yes**

Was ticket distribution made at the behest of agency official? **No**

Face Value of Each Ticket/Pass $112.00

Date(s) 11/11/15

Name of Source *San Jose Arena Authority*

#### 3. Recipients

- **A. Name of Agency, Department or Unit**
  - Number of Ticket(s)/Pass(es)
  - Describe the public purpose made pursuant to the agency's policy

- **B. Name of Individual**
  - (Last, First)
  - Number of Ticket(s)/Pass(es)
  - Identify one of the following:
    - Ceremonial Role
    - Other
    - Income
  - If checking "Ceremonial Role" or "Other" describe below:

- **C. Name of Outside Organization**
  - (Include address and description)
  - Number of Ticket(s)/Pass(es)
  - Describe the public purpose made pursuant to the agency's policy

- Roosevelt Park Neighborhood Association 8 Recognition

#### 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942.1. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: [Signature]

Print Name: [Print Name]

Title: [Title]

(Month, Day, Year)

Comment: [Comment]

---

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Office of Councilmember Paul Perez
   Division, Department, or Region (If Applicable)
   District 3
   Designated Agency Contact (Name, Title)
   Patricia Ceja
   Area Code/Phone Number: 408-535-4929
   E-mail: patricia.ceja@sanjose.ca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Event Description: Disney on Ice
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   Face Value of Each Ticket/Pass: $98.00
   Date(s): 10/10/15
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
   If yes: San Jose Arena Authority
   Name of Source
   Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Sacred Heart 24 Recognition

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18945. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Print Name: Paul Perez
   Title: Councilmember
   (Month, Day, Year)

   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name

Office of Councilmember Paul R PROGRAM
Division, Department, or Region (If Applicable)

District 3

Designated Agency Contact (Name, Title)

Patricia Ceja

Area Code/Phone Number E-mail
408-535-4929 patricia.ceja@sanjoseca.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☐

Event Description Sharks v. Ducks Preseason Game

Provide Title/Explanation

Face Value of Each Ticket/Pass $ 222.00

Date(s) 09/26/2015

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐

If no: San Jose Arena Authority

Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☐

If yes: ——— Official's Name (Last, First)

3. Recipients

- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community College</td>
<td>24</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 19944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Print Name

Title

(Month, Day, Year)

Comment: ———
Agency Name: Office of Councilmember Paul Velez, District 3

Designated Agency Contact: Patricia Ceja

Area Code/Phone Number: 408-535-4829
E-mail: patricia.ceja@sanjoseca.gov

Date of Original Filing: 09/20/15

Does the agency have a ticket policy? Yes

Event Description: Luis Miguel

Ticket(s)/Pass(es) provided by agency? Yes

Was ticket distribution made at the behest of agency official? Yes

Face Value of Each Ticket/Pass: $194.50

Name of Source: San Jose Arena Authority
Official's Name (Last, First):

3. Recipients
- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guadalupe - Washington Neighborhood Association</td>
<td>10</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942.1. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Paul Velez
Print Name: Councilmember
Title: (Month, Day, Year)

Comment: ____________________________
### Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

#### 1. Agency Name
Office of Councilmember Paul Peralez

#### Division, Department, or Region (If Applicable)
District 3

#### Designated Agency Contact (Name, Title)
Patricia Caeza

#### Area Code/Phone Number | E-mail
408-535-4929 | Patricia.ceaza@sanjose.ca.gov

#### Amendment (Must provide explanation in Part 3.)

#### Date of Original Filing:

#### 2. Function or Event Information

**Does the agency have a ticket policy?**
Yes [ ] No [x]

**Event Description**
Chayanne

**Ticket(s)/Pass(es) provided by agency?**
Yes [x] No [ ]

**Face Value of Each Ticket/Pass**
$113.00

**Date(s)**
09/06/15

**Was ticket distribution made at the behest of agency official?**
No [ ] Yes [x]

**Name of Source**
San Jose Arena Authority

#### 3. Recipients

- **A. Name of Agency, Department or Unit**
- **Number of Ticket(s)/Pass(es)**
- **Describe the public purpose made pursuant to the agency's policy**

- **B. Name of Individual**
- **Number of Ticket(s)/Pass(es)**
- **Identify one of the following:**
  - Ceremonial Role [ ]
  - Other [ ]
  - Income [ ]

- **C. Name of Outside Organization**
- **Number of Ticket(s)/Pass(es)**
- **Describe the public purpose made pursuant to the agency's policy**

| Mamas Unidas | 14 | Recognition |

#### 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date of Original Filing:**

**Comment:**
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   - Office of Councilmember Paul Peralta
   - Division, Department, or Region (if applicable): District 3
   - Designated Agency Contact (Name, Title): Maggie Le
   - Area Code/Phone Number: 408-535-4443
   - E-mail: district3@sanjoseca.gov

2. Function or Event Information
   - Does the agency have a ticket policy? Yes [ ] No [X]  
   - Face Value of Each Ticket/Pass $165.00
   - Event Description: Harlem Globetrotters
   - Date(s) 1/17/15
   - Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   - Was ticket distribution made at the behest of agency official? Yes [X] No [ ]

3. Recipients
   - Use Section A to identify the agency's department or unit.  
   - Use Section B to identify an individual.  
   - Use Section C to identify an outside organization.
   - A. Name of Agency, Department or Unit
      - Number of Ticket(s)/Pass(es)
      - Describe the public purpose made pursuant to the agency's policy

   - B. Name of Individual (Last, First)
      - Number of Ticket(s)/Pass(es)
      - Identify one of the following:
        - Ceremonial Role [ ] Other [ ] Income [X]
        - If checking "Ceremonial Role" or "Other" describe below:

   - C. Name of Outside Organization (Include address and description)
      - Number of Ticket(s)/Pass(es)
      - Describe the public purpose made pursuant to the agency's policy

4. Verification
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: Paul Peralta
   - Date: 01-09-15
   - Title: Councilmember

Comment: Recognition

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
1. **Agency Name**
   - Office of Council Member Sam Liccardo
   - Division, Department, or Region (If Applicable)
   - District 3

   **Designated Agency Contact (Name, Title)**
   - Maggie Le

   **Area Code/Phone Number**
   - 408-575-4903

   **E-mail**
   - district3@sjcc.gov

2. **Function or Event Information**
   - **Does the agency have a ticket policy?**
     - Yes [ ] No [ ]
   - **Event Description**
     - Juan Gabriel Concert
   - **Ticket(s)/Pass(es) provided by agency?**
     - Yes [ ] No [ ]
   - **Face Value of Each Ticket/Pass $**
     - 189.20
   - **Date(s) / / /**
     - 04/19/14

3. **Recipients**
   - **Use Section A to identify the agency’s department or unit.**
   - **Use Section B to identify an individual.**
   - **Use Section C to identify an outside organization.**

   **A. Name of Agency, Department or Unit**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency’s policy**

   **B. Name of Individual (Last, First)**
   - **Number of Ticket(s)/Pass(es)**
   - **Identify one of the following:**
     - Ceremonial Role [ ]
     - Other [ ]
     - Income [ ]
   - **If checking 'Ceremonial Role’ or ‘Other’ describe below:**
     - Ceremonial Role [ ]
     - Other [ ]
     - Income [ ]

   **C. Name of Outside Organization (Include address and description)**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency’s policy**
     - Washington Elementary Volunteers 4 Recognition

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   **Signature of Agency Head or Designee**
   - Sam Liccardo

   **Print Name**
   - Councilmember

   **Title**
   - 04/14/14

   **Comment:**

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   City of San Jose
   Division, Department, or Region (If Applicable)
   Council Office District 3
   Designated Agency Contact (Name, Title)
   Maggie Le
   Area Code/Phone Number (408)535-4903
   E-mail district 3@sanjoseca.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Event Description Harlem Globetrotters
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☐
   Face Value of Each Ticket/Pass $ 110
   Date(s) 01/06/14
   If no: san Jose Arena Authority
   Name of Source
   Name of Agency, Department or Unit
   A,
   Name of Individual (Last, First)
   B.
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:

   Number of Ticket(s)/Pass(es)
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:

   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   McKinley Neighborhood Teens 12
   Recognition

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   San Liccardo
   Print Name
   Title
   02/04/14 (Month, Day, Year)

   Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   **CITY OF SAN JOSE**

   Division, Department, or Region (If Applicable)
   **COUNCIL OFFICE DISTRICT 3**

   Designated Agency Contact (Name, Title)
   **Maggie Le**

   Area Code/Phone Number (408) 535-4903
   E-mail district3@sanjoseca.gov

2. Function or Event Information
   - Does the agency have a ticket policy? **Yes** [ ] **No** [ ]
   - Event Description: **SHARKS VS. BRUINS**
     **Provide Title/Explanation**
   - Ticket(s)/Pass(es) provided by agency? **Yes** [ ] **No** [ ]
     **Face Value of Each Ticket/Pass $139**
   - Date(s): **01/11/14**
   - Was ticket distribution made at the behest of agency official? **No** [ ] **Yes** [ ]
     **Official’s Name (Last, First)**

3. Recipients
   * Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

   **A. Name of Agency, Department or Unit**
   **Number of Ticket(s)/Pass(es)**
   **Describe the public purpose made pursuant to the agency’s policy**

   **B. Name of Individual**
   **(Last, First)**
   **Number of Ticket(s)/Pass(es)**
   **Identify one of the following:**
   - **Ceremonial Role** [ ] **Other** [ ] **Income** [ ]
     **If checking “Ceremonial Role” or “Other,” describe below:**
   - **Ceremonial Role** [ ] **Other** [ ] **Income** [ ]
     **If checking “Ceremonial Role” or “Other,” describe below:**

   **C. Name of Outside Organization**
   **(Include address and description)**
   **Number of Ticket(s)/Pass(es)**
   **Describe the public purpose made pursuant to the agency’s policy**
   - **Volunteers of Biblioteca Latinoamerica**
     **8**
     **recognition**

4. Verification
   **I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.**

   **Signature of Agency Head or Designee**
   **San Liccardo**
   **Print Name**
   **Councilmember**
   **Title**
   **(Month, Day, Year)**
   **02.04.14**

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   CITY OF SAN JOSE

   Division, Department, or Region (if Applicable)
   COUNCIL OFFICE DISTRICT 3

   Designated Agency Contact (Name, Title)
   MAGGIE L

   Area Code/Phone Number (408) 575-4903
   E-mail district3@sonjoseca.gov

2. Function or Event Information
   Does the agency have a ticket policy? [Yes] [No]
   Event Description: SHARKS VS. AVALANCHE
   Ticket(s)/Pass(es) provided by agency? [Yes] [No]
   Face Value of Each Ticket/Pass $139.00 $82.00
   Date(s): 12/23/13
   Name of Source: San Jose Arena Authority
   Was ticket distribution made at the behest of agency official? [No] [Yes]
   Official's Name: (Last, First)

3. Recipients
   Use Section A to Identify the agency's department or unit.
   Use Section B to Identify an individual.
   Use Section C to Identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Silicon Valley Global Partners 10 recognition

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   4. Verification
      I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
      Signature of Agency Head or Designee
      Print Name
councilmember
title

Comment: ____________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   
   City of San Jose
   
   Division, Department, or Region (If Applicable)
   
   Council Office, District 3
   
   Designated Agency Contact (Name, Title)
   
   Maggie Lee
   
   Area Code/Phone Number
   
   (408) 535-4403
   
   E-mail
   
   district3@sanjose.gov

2. Function or Event Information
   
   Does the agency have a ticket policy? Yes ☐ No ☐
   
   Event Description
   
   Sharks v. Wild
   
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☐

3. Recipients
   
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.
   
   A. Name of Agency, Department or Unit
      
      Number of Ticket(s)/Pass(es)
      
      Describe the public purpose made pursuant to the agency's policy
      
   B. Name of Individual
      
      (Last, First)
      
      Number of Ticket(s)/Pass(es)
      
      Identify one of the following:
      
      Ceremonial Role ☐ Other ☐ Income ☐
      
      Ceremonial Role ☐ Other ☐ Income ☐
      
      Ceremonial Role ☐ Other ☐ Income ☐
      
      Ceremonial Role ☐ Other ☐ Income ☐
      
   C. Name of Outside Organization
      
      (Include address and description)
      
      Number of Ticket(s)/Pass(es)
      
      Describe the public purpose made pursuant to the agency's policy
      
      Volunteers of Roosevelt Teen Center
      
      8
      
      Recognition

4. Verification
   
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head or Designee
   
   Sam Liccardo
   
   Title
   
   (Month, Day, Year)

   Printed Name

   Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - City of San Jose
   - Division, Department, or Region (If Applicable): Council Office, District 3
   - Designated Agency Contact (Name, Title): Maggie Le
   - Area Code/Phone Number: (408) 535-4903
   - E-mail: district3@sanjoseca.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes [ ] No [ ]
   - Event Description: Sharks v. Islanders
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
   - Was ticket distribution made at the behest of agency official? No [ ] Yes [ ]

3. **Recipients**
   - Use Section A to identify the agency's department or unit.
   - Name of Agency, Department or Unit
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency's policy

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   - Use Section B to identify an individual.
   - Name of Individual (Last, First)
   - Number of Ticket(s)/Pass(es)

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</td>
</tr>
</tbody>
</table>

   - Use Section C to identify an outside organization.
   - Name of Outside Organization (Include address and description)
   - Number of Ticket(s)/Pass(es)

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luna Park Chalk Art Festival volunteers</td>
<td>8</td>
<td>Recognition</td>
</tr>
</tbody>
</table>

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: Sam Liccardo
   - Date: 12.06.13 (Month, Day, Year)
   - Print Name: councilmember
   - Title: 

Comment:
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

#### 1. Agency Name
- **City of San Jose**
  - **Division, Department, or Region (If Applicable):** Council Office, District 3
  - **Designated Agency Contact:** Maggie Lee
    - **Area Code/Phone Number:** (408) 585-4903
    - **E-mail:** district3@sanjoseca.gov

#### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes [ ] No [x]
  - **Event Description:** Sharks v. Islanders
    - **Provide Title/Explanation:**
  - **Ticket(s)/Pass(es) provided by agency?** Yes [x] No [ ]
  - **Date of Original Filing:** (Month, Day, Year)
  - **Face Value of Each Ticket/Pass:** $ 192.20
  - **Date(s):** 12/10/13
  - **If no:** San Jose Arena Authority
    - **Name of Source:**
  - **Was ticket distribution made at the behest of agency official?** No [ ] Yes [x]
    - **Official’s Name (Last, First):**

#### 3. Recipients
- **Use Section A to identify the agency’s department or unit.**
- **Use Section B to identify an individual.**
- **Use Section C to identify an outside organization.**

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>silicon valley leadership group</td>
<td>24</td>
<td>recognition</td>
</tr>
</tbody>
</table>

#### 4. Verification
- **I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.**

**Signature of Agency Head or Designee:**
- **Signature:** Sam Liccardo
  - **Title:** Councilmember
  - **Date:** 12.09.13 (Month, Day, Year)
  - **Print Name:**

**Comment:**
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - **CITY OF SAN JOSE**
   - **COUNCIL OFFICE DISTRICT 3**
   - **Maggie Le**
   - **Area Code/Phone Number (408) 535-4403**
   - **E-mail district.3@sanjoseca.gov**

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes [ ] No [ ]
   - **Event Description**: **Marco Antonio Solis concert**
   - **Face Value of Each Ticket/Pass $99.50**
   - **Date(s)**: 09/22/13
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [ ]
   - **If yes:** **San Jose Arena Authority**
     - **Name of Source**
   - **Was ticket distribution made at the behest of agency official?** Yes [ ] No [ ]

3. **Recipients**
   - **Use Section A to identify the agency’s department or unit.**
   - **Use Section B to identify an individual.**
   - **Use Section C to identify an outside organization.**

   **A. Name of Agency, Department or Unit**

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   **B. Name of Individual**

   | Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following: | Ceremonial Role [ ] Other [ ] Income [ ]
   |---------------------------------|-----------------------------|-------------------------------|------------------------------------------|
   |                                 |                             | If checking “Ceremonial Role” or “Other”, describe below: | Ceremonial Role [ ] Other [ ] Income [ ]
   |                                 |                             |                               | Ceremonial Role [ ] Other [ ] Income [ ]

   **C. Name of Outside Organization**

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Guadalupe-Washington Neighborhood Volunteers</strong></td>
<td>8</td>
<td><strong>Recognition</strong></td>
</tr>
</tbody>
</table>

4. **Verification**

   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   - **Signature of Agency Head or Designee**: Sam Riccardo
   - **Print Name**: Councilmember
   - **Title**: 09/18/2013
   - **(Month, Day, Year)**

   **Comment:**

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 855/ASK-FPPC (855/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
City of San Jose
Division, Department, or Region (if applicable)
council office district 3
Street Address
200 E. Santa Clara Street, San Jose, CA 95113
Designated Agency Contact (Name, Title)
maggie le
Area Code/Phone Number E-mail
(408) 535-4403 district3@sanjoseca.gov

2. Function, Event, or Ceremonial Role Information
Title Subcats v. Chicago Rush
Description Football Game
Face Value of Each Admission $ 52.00
Date(s) 07/27/13
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒
Name of Source Sun Jose Arena Authority

Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☒ If yes: ___________________________
Official’s Name (Last, First) and Title ___________________________
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Description</th>
<th>Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington Neighborhood Volunteers</td>
<td>10</td>
<td>Yes ☐ No ☒</td>
<td>Recognition</td>
<td>☐ Income</td>
</tr>
<tr>
<td>☐ Yes</td>
<td>No</td>
<td>☐ Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>No</td>
<td>☐ Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>No</td>
<td>☐ Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Yes</td>
<td>No</td>
<td>☐ Income</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
Signature of Agency Head or Designee Sam Liccardo
councilmember
Title 07/25/13
Print Name (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
Office of Councilmember Sam Liccardo
Division, Department, or Region (if applicable)
District 3
Street Address
200 E. Santa Clara Street, San Jose, CA 95113
Designated Agency Contact (Name, Title)
Maggie Le, executive assistant
Area Code/Phone Number
(408) 535-4903
E-mail
district3@sanjose.ca.gov

Date Stamp 2013 JUN 6 PM 112
For Official Use Only California Form 802

2. Function, Event, or Ceremonial Role Information
Title
Starks v. Kings
Face Value of Each Admission $140.00
Description
Hockey game
Date(s) 05/26/13
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐
If no: Sun Jose Arena Authority
Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐
If yes: Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Adaptive Arts</td>
<td>6</td>
<td>Yes ☐ No ☑ Recognition</td>
</tr>
<tr>
<td>College of Adaptive Arts</td>
<td>3</td>
<td>Yes ☐ No ☑ Income</td>
</tr>
<tr>
<td>College of Adaptive Arts</td>
<td>2</td>
<td>Yes ☐ No ☑ Income</td>
</tr>
<tr>
<td>College of Adaptive Arts</td>
<td>1</td>
<td>Yes ☐ No ☑ Income</td>
</tr>
<tr>
<td>College of Adaptive Arts</td>
<td>0</td>
<td>Yes ☐ No ☑ Income</td>
</tr>
<tr>
<td>College of Adaptive Arts</td>
<td>0</td>
<td>Yes ☐ No ☑ Income</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee
Sam Liccardo
Print Name
Councilmember
Title
06/05/13
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   CITY OF SAN JOSE
   Council Office District 3
   200 E. Santa Clara Street, San Jose CA 95113
   Maggie Le
   (408) 536-4903
district3@sanjoseca.gov

2. Function, Event, or Ceremonial Role Information
   Title __________________________
   Description UFC on FOX
   Face Value of Each Admission $ 113.05
   Date(s) 4/20/13
   Ticket(s)/Admission(s) provided by agency? Yes □ No □
   If no: __________________________ san JOSE ARENA AUTHORITY
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes □ No □
   If yes: __________________________ Official’s Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luna Park Business Assoc.</td>
<td>8</td>
<td>Yes □ No □</td>
<td>Recognition event</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes □ No □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes □ No □</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes □ No □</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes □ No □</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes □ No □</td>
<td>Income</td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee: sam Liccardo
   Print Name: Councilmember
   Title: 4/15/13

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   CITY OF SAN JOSE

   Division, Department, or Region (if applicable)
   COUNCIL OFFICE DISTRICT 3

   Street Address
   200 E. SANTA CLARA STREET, SAN JOSE, CA 95113

   Designated Agency Contact (Name, Title)
   Maggie Le

   Area Code/Phone Number
   (408) 535-4903

   E-mail
   district5@sanjoseca.gov

   Date of Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information

   Title __________________________________________
   Description STEAKS V. KINGS HOCKEY GAME
   Face Value of Each Admission $ 80.00
   Date(s) 4/16/13
   Ticket(s)/Admission(s) provided by agency? Yes [ ] No [x] If no: San Jose Arena Authority

   Was the distribution to persons identified below made at the behest of an agency official?
   Yes [ ] No [ ]

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luna Park Foundation</td>
<td>8</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td>Recognition event</td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td>Yes [ ] No [ ]</td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td>Yes [ ] No [ ]</td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td>Yes [ ] No [ ]</td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td>Yes [ ] No [ ]</td>
<td></td>
<td>Income [ ]</td>
</tr>
<tr>
<td>Yes [ ] No [ ]</td>
<td></td>
<td>Income [ ]</td>
</tr>
</tbody>
</table>

3. Verification

I have read and understood FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee
Sam Liccardo
Print Name
councilmember
Title
A/15/13
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Agency Report of:**
*Ceremonial Role Events and Ticket/Admission Distributions*

1. **Agency Name**
   - City of San Jose

   **Division, Department, or Region (if applicable)**
   - Council Office District 3

   **Street Address**
   - 200 E. Santa Clara St., San Jose, CA 95113

   **Designated Agency Contact (Name, Title)**
   - Maggie Le

   **Area Code/Phone Number**
   - 408-635-4903

   **E-mail**
   - district3@sanjose.ca.gov

2. **Function, Event, or Ceremonial Role Information**

   **Title**
   - Vicereme Fernandez Concert

   **Face Value of Each Admission $**
   - 238.00

   **Date(s)**
   - 04/14/13

   **Ticket(s)/Admission(s) provided by agency?**
   - Yes [ ] No [ ]

   **Name of Source**
   - San Jose Arena Authority

   **Was the distribution to persons identified below made at the behest of an agency official?**
   - Yes [ ] No [ ]

   **Official's Name (Last, First) and Title**

   **The identity of recipient(s) and the explanation:**

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>McKinley Bonita Neighborhood Association</td>
<td>8</td>
<td>Yes [ ] No [ ]</td>
<td>Recognition event</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
</tbody>
</table>

3. **Verification**

   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   **Signature of Agency Head or Designee**
   - Jan [Signature]

   **Print Name**
   - Sam Liccardo

   **Title**
   - Councilmember

   **Date of Original Filing**
   - 04/11/13

---

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   City of San Jose
   Council Office District 3
   200 E. Santa Clara Street, San Jose, CA 95113
   Maggie Le
   408-535-4403
district3@sanjoseca.gov

2. Function, Event, or Ceremonial Role Information
   Title: Rihanna concert
   Face Value of Each Admission: $160
   Description: Concert
   Date(s): 04/06/13
   Ticket(s)/Admission(s) provided by agency? Yes [ ] No [x]
   Name of Source: San Jose Arena Authority

   Was the distribution to persons identified below made at the behest of an agency official?
   Yes [ ] No [ ]
   Official's Name (Last, First) and Title: 

   The identity of recipient(s) and the explanation:

   Name (Last, First) or Organization (Name, Address, Description)
   Number of Admission(s)/Ticket(s)
   Agency Official
   Income

   Cinequest
   1
   Yes [ ] No [x]
   development
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

   Yes [ ] No [ ]
   Income

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: Sam Liccardo
Print Name: Counciember
Title: (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose

Division, Department, or Region (If Applicable)
Council Office District 3

Designated Agency Contact (Name, Title)
Maggie Le

Area Code/Phone Number E-mail
408-535-4903 district3@sanjoseca.gov

2. Function or Event Information
Does the agency have a ticket policy? [ ] Yes [ ] No

Event Description SAP Open

Ticket(s)/Pass(es) provided by agency? [ ] Yes [ ] No

Was ticket distribution made at the behest of agency official? [ ] No [ ] Yes

Face Value of Each Ticket/Pass $ 75.00

Date(s) 02 / 17 / 13

San Jose Arena Authority If no:

Name of Source

If yes:

Official's Name (Last, First)

3. Recipients

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Identify one of the following:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANA Clean Up Volunteers</td>
<td>16</td>
<td>Recognition event</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understood FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Sam Liccardo
Print Name: Councilmember: 02/13/2013
Title: (Month, Day, Year)

Comment:
1. **Agency Name**
   City of San Jose  
   **Division, Department, or Region (If Applicable)**
   Council Office District 3  
   **Designated Agency Contact (Name, Title)**
   Maggie Le  
   **Area Code/Phone Number** 408-535-4903  
   **E-mail** district3@sanjoseca.gov

2. **Function or Event Information**
   **Does the agency have a ticket policy?** Yes ☐ No ☐  
   **Face Value of Each Ticket/Pass** $192.00
   **Event Description** Sharks Hockey Game  
   **Date(s)** 01/26/13
   **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☒
   **Name of Source** San Jose Arena Authority  
   **Was ticket distribution made at the behest of agency official?** No ☐ Yes ☐
   **Official's Name (Last, First)**

3. **Recipients**
   - **A. Name of Agency, Department or Unit**  
     - **Number of Ticket(s)/Pass(es)**  
     - **Describe the public purpose made pursuant to the agency's policy**
   - **B. Name of Individual (Last, First)**  
     - **Number of Ticket(s)/Pass(es)**  
     - **Identify one of the following:**
       - Ceremonial Role ☐ Other ☐ Income ☐
       - If checking "Ceremonial Role" or "Other" describe below:
         - Ceremonial Role ☐ Other ☐ Income ☐
         - If checking "Ceremonial Role" or "Other" describe below:
   - **C. Name of Outside Organization (Include address and description)**
     - **Number of Ticket(s)/Pass(es)**  
     - **Describe the public purpose made pursuant to the agency's policy**
     - Gardner Center Volunteers 16  
     - Recognition event

4. **Verification**
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   **Signature of Agency Head or Designee**  
   **Print Name** Sam Liccardo
   **Title** Councilmember  
   **Date** 02/13/2013
   **Comment:**
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of San Jose

Division, Department, or Region (If Applicable)
Council Office District 3

Designated Agency Contact (Name, Title)
Maggie Le

Area Code/Phone Number E-mail
408-535-4903 district3@sanjoseca.gov

Date of Original Filing: 01/20/13

2. Function or Event Information

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Face Value of Each Ticket/Pass</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harlem Globetrotters</td>
<td>163.00</td>
<td>01/20/13</td>
</tr>
</tbody>
</table>

Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]

Was ticket distribution made at the behest of agency official? No [X] Yes [ ]

3. Recipients

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [X] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last, First</td>
<td></td>
<td>Ceremonial Role [X] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington United Youth Center</td>
<td>16</td>
<td>Recognition event</td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Sam Liccardo
Print Name: Councilmember: 02/13/2013
Title: (Month, Day, Year)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)